

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CareSource Management Services Co. PAC

Full Name (Last, First, Middle Initial)

A. Christina L Turner

Mailing Address 230 N. Main Street

City State Zip Code
Dayton OH 45402

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareSource Management Group

Occupation

VP Business Integration & Strategic Ma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2015

Transaction ID : 9138872

Amount of Each Receipt this Period

130.00

Full Name (Last, First, Middle Initial)

B. Samuel Thomas George

Mailing Address 230 North Main Street

City State Zip Code
Dayton OH 45402

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareSource Management Group

Occupation

SVP, Operations & Bus Partner Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 9147664

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

c. Mark R Grippi

Mailing Address 230 N. Main Street

City State Zip Code
Dayton OH 45402

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareSource Management Group

Occupation

Director, Health Partnerships

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2015

Transaction ID : 9149083

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

588.00